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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☒ Declaration  
Submitted  
With Initial  
Filing  
OR  
☐ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number 3351.2

First Named Inventor Shantanu V. Kaushikkar

**COMPLETE IF KNOWN**

Application Number /

Filing Date July 17, 2001

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural name are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**System, Method, and Computer Software Product for Specifying a Scanning Area of a Substrate**

the specification of which (Title of the invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Country	Priority Not Claimed	Certified Copy Attached	
					YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/226,999 60/286,578	08/22/00 4/26/01	

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Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231.

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 3532 of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in a prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business with the Patent and Trademark Office connected therewith.

☐ Customer Number 22886 → Place Customer Number Bar Code Label here  
OR  
☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Vern Norviel	32,483	Philip L. McGarrigle	31,396
Wei Zhou	44,419	Alan B. Sherr	42,147

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 22886 OR ☒ Correspondence address

Name	Affymetrix, Inc.				
Address	General IP Counsel - Legal Department				
Address	3380 Central Expressway				
City	San Jose	State	CA	ZIP	95051
Country	USA	Telephone	408/731-5000	Fax	408/731-8382

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief believed to be true; and further that these statements were made with the knowledge that willful false statements and the like are made punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
Shantanu V.	Kaushikkar

Inventor's Signature	S.V. Kaushikkar			Date	7/1
Residence City	San Jose	State	CA	Country	USA
Post Office Address	3343 Ariel Joshua Court				
Post Office Address					
City	San Jose	State	CA	ZIP	95135
				Country	USA

☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached to

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## PATENT ASSIGNMENT

**SUBMISSION TYPE:** NEW ASSIGNMENT

**NATURE OF CONVEYANCE:** ASSIGNMENT OF ASSIGNOR'S INTEREST

### CONVEYING PARTY DATA

**Conveying Party Name:** Kaushikkar, Shantanu V.

**Execution Date:** 07/13/2001

### RECEIVING PARTY DATA

**Receiving Party Name:** Affymetrix, Inc.

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**Internal Address:** Legal Department

**City:** Santa Clara

**State:** CALIFORNIA

**Country:**

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The USPTO, Office of Public Records, will send correspondence via facsimile to **FAX NUMBER:** 408-731-5392

### CORRESPONDENCE DATA:

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**CUSTOMER NUMBER:** 022886

***To the best of my knowledge, the foregoing information is true and correct and any attached copy is a true copy of the original document.***

**NAME OF PERSON SIGNING:** Alan B. Sherr, Reg. No. 42,147

**DATE SIGNED:** 07/17/2001

**Total Attachments: 2**

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